



Bib Data Sheet


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SERIAL NUMBER 09/481,155	FILING DATE 01/12/2000 RULE -	CLASS 348	GROUP ART UNIT 2711	ATTORNEY DOCKET NO. 01263.01939
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APPLICANTS
 Arturo A. Rodriguez, Norcross, GA ;
 Timothy W. Simerly, Cumming, GA ;
 Luis A. Rovira, Atlanta, GA ;
 William E. Wall Jr., Atlanta, GA ;
 Neilesh R. Patel, Boston, MA ;

**** CONTINUING DATA *******
 THIS APPLICATION IS A CON OF 08/857,595 05/16/1997

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
**** 03/08/2000**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY GA	SHEETS DRAWING 9	TOTAL CLAIMS 36	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS
 SCIENTIFIC-ATLANTA, INC.
 DEPUTY GENERAL COUNSEL
 FOR INTELLECTUAL PROPERTY
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TITLE
 Video phone over cable networks

FILING FEE RECEIVED 978	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit



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CONFIRMATION NO. 5259

Bib Data Sheet

SERIAL NUMBER 09/481,155	FILING DATE 01/12/2000 RULE	CLASS 725	GROUP ART UNIT 2614	ATTORNEY DOCKET NO. 01263.01939
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APPLICANTS

Arturo A. Rodriguez, Norcross, GA;
 Timothy W. Simerly, Cumming, GA;
 Luis A. Rovira, Atlanta, GA; William E. Wall Jr., Atlanta, GA;
 Neilesh R. Patel, Boston, MA;

** CONTINUING DATA ***** *YES AS*
 This application is a CON of 08/857,595 05/16/1997 ABN

** FOREIGN APPLICATIONS ***** *NONE*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 03/08/2000

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY GA	SHEETS DRAWING 9	TOTAL CLAIMS 36	INDEPENDENT CLAIMS 3
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Verified and Acknowledged
 Examiner's Signature _____ Initials _____

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 5642
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 30044

TITLE
 Video phone over cable networks ✓

FILING FEE	FEES: Authority has been given in Paper	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of
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